

# Stop Loss Renewal

City of Round Rock #819919  
 January 1, 2021 through December 31, 2021



## Firm Stop Loss Quote

- This exhibit outlines your Firm renewal rates effective January 1, 2021.
- Pricing assumes plan enrollment of 896 employees. If actual enrollment varies by more than 10% in total and/or the plan design changes we reserve the right to readjust the stop loss premium.
- In an environment where healthcare costs are increasing, maintaining the same deductible shifts more of the claim cost to the stop loss provider.
- To help reduce the effect of leveraging, it is recommended that a plan sponsor consider increasing their Stop Loss deductible to keep pace with medical trend.
- **Please refer to the stop loss policy for detailed Stop Loss information.**

	<u>Current</u> <u>1/1/2020</u>	<u>Renewal</u> <u>1/1/2021</u>	<u>Option 1</u> <u>1/1/2021</u>
<b><u>STOP LOSS COVERAGE SPECIFICATIONS</u></b>			
Policy Period Length (months):	12	12	12
Number of Employees Covered Under Stop Loss:	874	896	896
Number of Single Covered Under Stop Loss:	416	420	420
Number of Family Covered Under Stop Loss:	458	476	476
Aetna Choice POS II:	419	438	438
Aetna Select:	455	458	458
Producer Compensation:	0.0%	0.0%	0.0%
Terminal Liability Option:	None	None	None
Claims Paid Basis for Medical Coverages:	Cleared	Cleared	Cleared
Claims Paid Basis for APM Rx coverage is on a cleared basis			

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<b><u>INDIVIDUAL STOP LOSS COVERAGE SPECIFICATIONS</u></b>			
Individual Stop Loss Level:	\$200,000	\$200,000	\$225,000
Contract Type:	Paid	Paid	Paid
Coinsurance %:	100%	100%	100%
M/N Claims Apply to ISL (Aetna Administered only):	Yes	Yes	Yes
Rx Claims Applied to ISL (Aetna Administered only):	Yes	Yes	Yes
Individual Specific Stop Loss Limits (Lasering):	No Lasering	No Lasering	No Lasering
Individual Lifetime Stop Loss Payment Amount:	Unlimited	Unlimited	Unlimited
Reimbursement Method:	Immediate	Immediate	Immediate

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<b><u>AGGREGATE STOP LOSS COVERAGE SPECIFICATIONS</u></b>			
Aggregate Stop Loss Percentage:	125%	125%	125%
Contract Type:	Paid	Paid	Paid
Maximum Annual ASL Payment Amount:	\$1,000,000	\$1,000,000	\$1,000,000
Reimbursement Method:	Monthly Budget Feature	Monthly Budget Feature	Monthly Budget Feature
Prior Carrier Runoff Cap:	\$0	\$0	\$0
Total Claims Applied to Aggregate Stop Loss:	\$11,098,223	\$10,778,353	\$10,884,325
Benefits that apply to ASL-Medical:	\$8,412,730	\$8,075,480	\$8,075,480
Benefits that apply to ASL-Drug:	\$2,685,493	\$2,702,873	\$2,702,873
Lasering Adjustment:	\$0	\$0	\$0
Pooling and Coinsurance Adjustment:	\$0	\$0	\$105,972

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<b><u>FINANCIAL INFORMATION</u></b>			
Stop Loss Premium at renewal lives:	\$1,654,840	\$1,770,639	\$1,602,371
State Assessment Fee	\$0	\$0	\$0
Total Stop Loss Premium:	\$1,654,840	\$1,770,639	\$1,602,371
<b>Total Premium (PEPM) Composite Rate:</b>	<b>\$153.91</b>	<b>\$164.68</b>	<b>\$149.03</b>
Individual Stop Loss premium as % of Total Premium:	95.98%	96.50%	96.08%
<b>ISL rate:</b>	<b>\$148.17</b>	<b>\$158.60</b>	<b>\$142.90</b>
<b>ASL rate:</b>	<b>\$5.74</b>	<b>\$6.08</b>	<b>\$6.13</b>
<b>Percentage Premium Increase:</b>		<b>7.0%</b>	<b>-3.2%</b>
Stop Loss Aggregate Limit*:	\$13,872,779	\$13,472,941	\$13,605,406
<b>Stop Loss Aggregate Limit (PEPM) Composite Factor:</b>	<b>\$1,322.73</b>	<b>\$1,253.06</b>	<b>\$1,265.38</b>

\*Minimum Stop Loss Aggregate Limit will be set using the first month enrollment x Stop Loss Aggregate Limit (PEPM) Composite Factor x # of contract Months.

Premium rates are billed and Aggregate Factors are administered on a composite basis.